

Title: 3.1. Responsibilities of the Continuum of Care

Prepared By: CAFTH

Reviewed By: Governing Council

Approved By: Governing Council

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Purpose:

The following policy outlines the responsibilities of the Continuum of Care, as identified in 24 CFR 578.7. Additional responsibilities and procedures surrounding the operation of a CoC outlined in 24 CFR 578 can be found in Appendix II.

Scope:

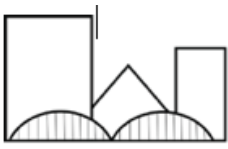
This policy applies to everyone who operates under the umbrella of the CoC, including the CoC and HMIS Lead Agencies, the MSCHC Governing Council, and agencies that receive CoC and/or ESG funding for program operation.

Policy:

The following section is taken directly from 24 CFR 578.7 set by HUD which outlines the responsibilities of a Continuum of Care¹:

1. *Operate the Continuum of Care.* The Continuum of Care must:
 - a. Hold meetings of the full membership, with published agendas, at least semi-annually;
 - b. Make an invitation for new members to join publicly available within the geographic [area] at least annually;
 - c. Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years;
 - d. Appoint additional committees, subcommittees, or workgroups;
 - e. In consultation with the collaborative applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with subpart B of

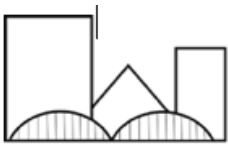
¹ Department of Housing & Urban Development. (2012). 24 CFR § 578.7 – responsibilities of the continuum of care. Retrieved from: <https://www.govinfo.gov/content/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml>



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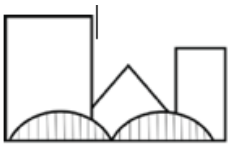
this part and with HMIS requirements as prescribed by HUD; and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board;

- f. Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and take action against poor performers;
- g. Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD;
- h. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers. This system must comply with any requirements established by HUD by Notice.
- i. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:
 - i. Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part;
 - ii. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance (these policies must include the emergency transfer priority required under § 578.99(j)(8));
 - iii. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance (these policies must include the emergency transfer priority required under § 578.99(j)(8));
 - iv. Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;



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- v. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance (these policies must include the emergency transfer priority required under § 578.99(j)(8)); and
 - vi. Where the Continuum is designated a high-performing community, as described in subpart G of this part, policies and procedures set forth in 24 CFR 576.400(e)(3)(vi), (e)(3)(vii), (e)(3)(viii), and (e)(3)(ix).
2. *Designating and operating an HMIS.* The Continuum of Care must:
- a. Designate a single Homeless Management Information System (HMIS) for the geographic area;
 - b. Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead;
 - c. Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS
 - d. Ensure consistent participation of recipients and subrecipients in the HMIS; and
 - e. Ensure the HMIS is administered in compliance with requirements prescribed by HUD.
3. *Continuum of Care planning.* The Continuum must develop a plan that includes:
- a. Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:
 - i. Outreach, engagement, and assessment;
 - ii. Shelter, housing, and supportive services;
 - iii. Prevention strategies.
 - b. Planning for and conducting, at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements:
 - i. Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.
 - ii. Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.
 - iii. Other requirements established by HUD by Notice.
 - c. Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;



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- d. Providing information required to complete the Consolidated Plan(s) within the Continuum's geographic area;
 - e. Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.
4. *VAWA emergency transfer plan*. The Continuum of Care must develop the emergency transfer plan for the Continuum of Care that meets the requirements under § 578.99(j)(8).